Fill in this information to identify you	r case:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under: ✓ Chapter 7 ─ Chapter 11 ─ Chapter 12 ─ Chapter 13	☐ Check if this is amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name	About Debtor 1.	About Debtor 2 (Spouse Only in a John Case).	
	Write the name that is on your	O I 17		
	government-issued picture	Chakita	F: (N	
	identification (for example,	First Name	First Name	
	your driver's license or	R		
	passport).	Middle Name	Middle Name	
	. ,	Lucas		
	Bring your picture	Last Name	Last Name	
	identification to your meeting			
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)	
		Guiix (Gr., Gr., II, III)	Julia (Jr., Jr., II, III)	
2.	All other names you			
	have used in the last 8	First Name	First Name	
	years			
		Middle Name	Middle Name	
	Include your married or			
	maiden names.	Last Name	Last Name	
3.	Only the lest 4 digits of			
э.	Only the last 4 digits of your Social Security	xxx - xx - <u>0</u> <u>1</u> <u>0</u> <u>1</u>	xxx - xx	
	number or federal			
	Individual Taxpayer	OR	OR	
	Identification number	Ovv vv	Ovv vv	
	(ITIN)	9xx - xx	9xx - xx	
	Amu businsas namas	—		
4.	Any business names	I have not used any business names or EINs.	☐ I have not used any business names or EINs.	
	and Employer			
	Identification Numbers	Business name	Business name	
	(EIN) you have used in	Dusiliess Haiffe	Dualiteaa Haiffe	
	the last 8 years			
	Include trade names and	Business name	Business name	
	doing business as names			

	802 R Doc 1 Filed 12/21/15 Entered	12/21/15 10:32:03 Desc Main
First Name	Middle Name பழக்கூளின் சவுச் 2 ப	About Debtor 2 (Spouse Only in a Joint Case):
	EIN	EIN
		EIN
5. Where you live		If Debtor 2 lives at a different address:
•	7148 S Ridgeland Street	
	Number Street	Number Street
	Chicago IL 60649	
	City State ZIP Code Cook	City State ZIP Code
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
	7148 S Ridgeland	
	Number Street	Number Street
	P.O. Box	P.O. Box
	Chicago IL 60649	212.0
	City State ZIP Code	City State ZIP Code
6. Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
Part 2: Tell the Co	ourt About Your Bankruptcy Case	
7. The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see Note of the Bankruptcy (Form 2010)). Also, go to the top of	otice Required by 11 U.S.C. § 342(b) for Individuals Filing f page 1 and check the appropriate box.
are choosing to file under	⊘ Chapter 7	
411441	Chapter 11	
	Chapter 12	
	Chapter 13	

Debt	tor 1	Case 15-42802 Chakita			Filed 12/21/15 Dockiment	Entered 1	2/21/ អ្នស្កាប់ព	15 10:32:0 ber (if known) _	3 Desc Main
8.	Цож	First Name you will pay the fee	Middle N						e clerk's office in your local
о.	now	you will pay the fee	$\overline{\mathbf{Q}}$	court f	for more details about ho	w you may pay. or money order.	Typicall If your	y, if you are payi attorney is subn	ng the fee yourself, you may nitting your payment on your
					I to pay the fee in install duals to Pay Your Filing F	•			nd attach the Application for
				By law than 1 fee in	v, a judge may, but is not 50% of the official pover	required to, waive ty line that applies ose this option, ye	e your f s to you ou mus	ee, and may do ur family size and t fill out the Appl	ou are filing for Chapter 7. so only if your income is less d you are unable to pay the ication to Have the Chapter 7
9.		you filed for	$\overline{\mathbf{A}}$	No					
		ankruptcy within the st 8 years?		Yes.					
			Distr	ict			When		Case number
			Distr	rict _				MM / DD / YYYY	
			Distr	rict _			When		Case number
10.		ny bankruptcy		No					
		s pending or being by a spouse who is		Yes.					
		ling this case with or by a business	Deb	tor				Relationshi	p to you
	•	er, or by an	Distr	rict			When	MM / DD / YYYY	Case number,
	umu							MIMI / UU / YYYY	IT KNOWN
			Deb	tor _				Relationshi	p to you
			Distr	ict _			When	MM / DD / YYYY	Case number,if known
11.	•	ou rent your ence?		No. Yes.	Go to line 12. Has your landlord obtain residence?	ned an eviction ju	dgment	against you and	I do you want to stay in your
					No. Go to line 12.Yes. Fill out Initial	Statement About	an Evi	ction Judgment A	Against You (Form 101A)

and file it with this bankruptcy petition.

5-42802 Doc 1 Desc Main Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor No. Go to Part 4. 12. Are you a sole proprietor of any full- or part-time Yes. Name and location of business business? A sole proprietorship is a Name of business, if any business you operate as an individual, and is not a Number Street separate legal entity such as a corporation, partnership, or LLC. If you have more than one City ZIP Code State sole proprietorship, use a separate sheet and attach it Check the appropriate box to describe your business: to this petition. Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it Chapter 11 of the can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your **Bankruptcy Code and** most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return are you a small business or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). debtor? I am not filing under Chapter 11. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in No. For a definition of small the Bankruptcy Code. business debtor, see 11 U.S.C. § 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No property that poses or is Yes. What is the hazard? alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own If immediate attention is needed, why is it needed? any property that needs immediate attention?

repairs?

For example, do you own perishable goods, or

livestock that must be fed, or

a building that needs urgent

Number

City

Street

Where is the property?

ZIP Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required t	o receive a	briefing	abou
credit counseling			

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

> through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Debtor 1 Case 15-42802 R Doc 1 Filed 12/21/15 Entered 12/21/15 10:32:03 Desc Main Page 6 of 49 number (if known)

Р	art 6: Answer These	Questi	ons f	or Reporting Pu	ırpos	ses			
16.	What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. ✓ Yes. Go to line 17. 							
		16b.	mon	•	-				ebts that you incurred to obtain usiness or investment.
		16c.	State	e the type of debts yo	ou ow	e that are not consu	umer or busin	ess de	ebts.
17.	Are you filing under Chapter 7?		No.	I am not filing under	· Chap	oter 7. Go to line 18	3.		
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		Ø	Yes. I am filing under Chapter 7. Do you estimate that after a administrative expenses are paid that funds will be avail No Yes						
18.	8. How many creditors do you estimate that you owe?		✓ 1-49☐ 50-99☐ 100-199☐ 200-999			1,000-5,000 5,001-10,000 10,001-25,000]]]	<u> </u>	5,001-50,000 0,001-100,000 lore than 100,000
19.	How much do you estimate your assets to be worth?		\$100,0	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50	million [) million [\$1 \$1	500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion lore than \$50 billion
20.	How much do you estimate your liabilities to be?		\$100,0	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50	million [) million [\$1 \$1	500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion lore than \$50 billion
P	art 7: Sign Below								
For	you		e exar	•	nd I d	eclare under penalt	y of perjury th	at the	information provided is true
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
		If no attorney represents me and I did not pay or agree to pay someone who is an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I requ	uest re	elief in accordance wi	ith the	e chapter of title 11,	United States	s Code	e, specified in this petition.
		conn	ection		ase ca	an result in fines up			oney or property by fraud in orisonment for up to 20 years,
		_		akita R Lucas			XSignature		
			Ū	re of Debtor 1 ed on 12/21/2015			_		ebtor 2
			VECUIF	;u on 1 2/2 1/2013			Executed on		

MM / DD / YYYY

MM / DD / YYYY

Case 15-42802 Doc 1 Filed 12/21/15 Entered 12/21/15 10:32:03 Desc Main Page 7 of 49 Power (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Robert J. Adams & Associates Printed name Robert J. Adams & Associates Firm Name 901 W. Jackson St., Suite 1810 Number Street Chicago IL 60607 City State ZIP Code Contact phone (312) 346-0100 Email address	/s/ Robert J. Adams & Associates	Date	12/21/2015
Printed name Robert J. Adams & Associates Firm Name 901 W. Jackson St., Suite 1810 Number Street Chicago City IL 60607 ZIP Code Contact phone (312) 346-0100 Email address	Signature of Attorney for Debtor		MM / DD / YYYY
Street Street Street Street Street State State			
901 W. Jackson St., Suite 1810 Number Street Chicago IL 60607 City State ZIP Code Contact phone (312) 346-0100 Email address	Robert J. Adams & Associates		
Chicago IL 60607 City State ZIP Code Contact phone (312) 346-0100 Email address	Firm Name		
Chicago IL 60607 City State ZIP Code Contact phone (312) 346-0100 Email address	901 W. Jackson St., Suite 1810		
City State ZIP Code Contact phone (312) 346-0100 Email address 0013056	Number Street		
City State ZIP Code Contact phone (312) 346-0100 Email address 0013056			
Contact phone (312) 346-0100 Email address	Chicago	IL	60607
0013056			
	Oity	State	ZIP Code
Bar number State	Contact phone (312) 346-0100		ZIP Code

			Do	<u>rument — Page 8 i</u>	<u>at</u> 49	
F	ill in this inf	ormation to i	dentify your case	and this filing:		
De	ebtor 1	Chakita	R	Lucas		
		First Name	Middle Name	Last Name		
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	_	
Uı	nited States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS	_	
	ase number				☐ Check	if this is an
(if	known)				<u> </u>	ded filing
	ficial Form					
Sc	hedule A	B: Propert	у			12/15
the filin she	asset in the cang together, boset to this form	ategory where y th are equally re . On the top of a	ou think it fits best. B esponsible for supplyi any additional pages,	e as complete and accurate ng correct information. If n write your name and case r	a asset fits in more than one ca e as possible. If two married pe nore space is needed, attach a number (if known). Answer eve I Estate You Own or Have	eople are separate ery question.
1.	Do you own	or have any lega	al or equitable interest	in any residence, building,	land, or similar property?	
	•	to Part 2.		3,	, , , , , , , , , , , , , , , , , , ,	
	Yes. Wh	nere is the proper	ty?			
2.		-	•	of your entries from Part 1, ite that number here		\$0.00
P	art 2: De	scribe Your \	/ehicles			
	-	_	=		y are registered or not? Include G: Executory Contracts and Unex	
					ŕ	,
3.	Cars, vans, to	rucks, tractors,	sport utility vehicles, r	notorcycles		
	✓ No ☐ Yes					
4.				recreational vehicles, other fishing vessels, snowmobile	vehicles, and accessories es, motorcycle accessories	
5.		•	-	of your entries from Part 2, ite that number here		\$0.00
P	art 3: De	scribe Your F	Personal and Hous	sehold Items		
						Current value of the
Do	you own or ha	ve any legal or	equitable interest in a	ny of the following items?		portion you own? Do not deduct secured claims or exemptions.
6.	_	oods and furnis	-			-
		ajor appliances, f	furniture, linens, china,	kitchenware		
	☐ No ☑ Yes. Des	scribe used f	furniture			\$300.00

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1	Case 15-4280 Chakita First Name	DOC 1 R Middle Name	Filed 12/21/15 Document Last Name	Entered 12/21/15 10:32:03 Page 9 ot 49number (if known)	
7.	Electro	onics				
		music collection			quipment; computers, printers, scanners; s, cameras, media players, games	
	✓ No	s. Describe				
8.		•			books, pictures, or other art objects; s, memorabilia, collectibles	
	✓ No	s. Describe				
9.			raphic, exercise, a	nd other hobby equipme bls; musical instruments	ent; bicycles, pool tables, golf clubs, skis;	
	✓ No	s. Describe				
10.		oles: Pistols, rifles, s	hotguns, ammunit	ion, and related equipm	ent	
	✓ No	es. Describe				
11.	Clothe Examp		es, furs, leather co	oats, designer wear, sho	es, accessories	
	☐ No ✓ Ye	s. Describe clo	thes			\$200.00
12.	Jewel i Examp	•	ry, costume jewelr	y, engagement rings, w	edding rings, heirloom jewelry, watches, gems	·,
	✓ No	s. Describe				
13.		arm animals bles: Dogs, cats, bird	ds, horses			
	✓ No	s. Describe				
14.	Any of	•	ousehold items y	ou did not already list	including any health aids you	
	_	s. Give specific ormation				
15.			-	· · · · · · · · · · · · · · · · · · ·	ny entries for pages you have	\$500.00
Pa	art 4:	Describe You	ır Financial As	ssets		
Doy	you ow	n or have any legal	or equitable inte	rest in any of the follow	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examp	oles: Money you hav petition	e in your wallet, in	your home, in a safe de	eposit box, and on hand when you file your	
	□ No				Cash:	\$50.00

Deb	tor 1	Case 15-428 Chakita	R	Filed 12/21/15 Dolowasent	Entered 12/21/15 10:32:03 Page 10 @ast9humber (if known)	
		First Name	Middle Name	Last Name		
17.			uses, and other sim		es of deposit; shares in credit unions, have multiple accounts with the same	
		lo ′es		Institution name:		
		17.1. Che	cking account:	Chase		\$75.00
18	Bono	ls, mutual funds, or	•			
				s with brokerage firms, r	money market accounts	
	ب	lo (La effection on the			
	ЦY	'es	institution or iss	uer name:		
19.		publicly traded stoo terest in an LLC, pa			ncorporated businesses, including	
	بخا	lo 				
	_	es. Give specific				
		nem	•		% of ownership:	
20.	Nego	<i>tiable instrument</i> s in	clude personal che	cks, cashiers' checks, p	 -negotiable instruments oromissory notes, and money orders. ne by signing or delivering them. 	
	ir	No Yes. Give specific Information about	Issuer name:			_
21.	Exan	profit-sharing	A, ERISA, Keogh,	401(k), 403(b), thrift sav	rings accounts, or other pension or	
		lo 'es. List each	Type of account:	Institution name:		
	_	ccount separately.	401(k) or similar p			
			Pension plan:			
			IRA:			
			Retirement accou	nt:		_
			Keogh:			
			Additional accoun	t:		
			Additional accoun	t:		
22.	Secu	rity deposits and p	repayments			
	Your <i>Exan</i>	share of all unused of	deposits you have		ontinue service or use from a company electric, gas, water), telecommunications	
	ب ب	lo 'es		Institution name or in-	dividual:	

Dah	tor 1 Case 15-4280.	2 D(R	oc 1		0.12/21/ 0.1443sent					L/15 10:32 Imber (if know		Desc IV	iain
Deb	tor 1 Chakita First Name	Middle	Name		ast Name		ray	<u>5</u> 11 '	wa ses nu	imber (ir know	n)		
23.	Annuities (A contract for a ✓ No ☐ Yes				-	y to yo	ou, eithe	∍r for lif	e or for a	number of ye	ears)		
24.	Interests in an education I 26 U.S.C. §§ 530(b)(1), 529				ualified Al	BLE	prograi	n, or u	nder a q	ualified state	tuition pro	ogram.	
	✓ No ☐ Yes	Institutio	on name	and des	cription. S	Separa	ately file	the re	cords of	any interests.	11 U.S.C.	. § 521(c)	
25.	Trusts, equitable or future powers exercisable for yo ☑ No ☐ Yes. Give specific information about them	our bene		perty (o	ther than a	anyth	ing list	ed in li	ine 1), ar	nd rights or			
26.	Patents, copyrights, trade Examples: Internet domain No						-			ents			
	Yes. Give specific information about them												
27.	Licenses, franchises, and Examples: Building permits ✓ No ☐ Yes. Give specific information about them	s, exclusi		_		ssocia	tion ho	dings, I	liquor lice	enses, profess	ional licen	ses	
Mor	ney or property owed to you	u?										portion y Do not de	value of the vou own? educt secured exemptions.
28.	Tax refunds owed to you												
	No ✓ Yes. Give specific info									earned	Federa	l:	\$5,200.00
	about them, including w you already filed the ret	turns			hild tax c						State:		\$0.00
	and the tax years		Federa	ıl: rema	ining po	rtion	of 201	5 refu	nd. An	nt: \$1,200.00	Local:		\$0.00
29.	Family support Examples: Past due or lum	p sum al	imony, s _l	pousal s	support, chi	ild su	pport, n	nainten	ance, div	orce settleme	nt, propert	y settlemei	nt
	✓ No ☐ Yes. Give specific info	rmation								Alimony:			\$0.00
	_ `									Maintena	ance:		\$0.00
										Support:			\$0.00
										Divorce s	settlement	:	\$0.00
										Property	settlemen	t:	\$0.00

Deb	Case 15-42802	Desc Main
30.	First Name Middle Name Last Name Other amounts someone owes you	
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	
	✓ No Yes. Give specific information	
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance.	ance
	No Yes. Name the insurance company name: company of each policy and list its value	urrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died	
	✓ No✓ Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	✓ No Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims	
	✓ No Yes. Describe each claim	
35.	Any financial assets you did not already list	
	✓ No✓ Yes. Give specific information	
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$5,325.00
P	art 5: Describe Any Business-Related Property You Own or Have an Interest In. List any	real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	✓ No. Go to Part 6. ✓ Yes. Go to line 38.	
		Current value of the portion you own? Do not deduct secured
38.	Accounts receivable or commissions you already earned	claims or exemptions.
	✓ No Yes. Describe	
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
	✓ No ✓ Yes Describe	

Deb	tor 1	9	ASE 15-4 Chakita First Name		Doc 1 R Middle Name	Filed 12/21/15 Doloursent Last Name	Entered 12/21/15 Page 13 ofa49 umbe		
40.	Мас	hine	ry, fixtures,	equipm	ent, supplies	you use in business, a	nd tools of your trade		
			Describe						
41.	Inve	ntory	,						
			Describe						
42.	Inter	ests	in partners	hips or	joint ventures	5			
			Describe	. Name	of entity:			% of ownership:	
43.	Cus	tome	r lists, mail	ing lists	, or other con	npilations			
	ب	No Yes.	Do your lis			videntifiable information	n (as defined in 11 U.S.C. §	101(41A))?	
44.	Any	busi	ness-relate	d prope	rty you did no	ot already list			
			Give specifi						
45.							any entries for pages you h		\$0.00
Pa	art 6					mmercial Fishing-F in farmland, list it in l	Related Property You (Part 1.	Own or Have a	an Interest In.
46.	Do y	ou o	wn or have	any leg	al or equitabl	e interest in any farm- o	or commercial fishing-relat	ed property?	
			Go to Part 7. Go to line 4						
4	P	•							Current value of the portion you own? Do not deduct secured claims or exemptions.
4/.	Farn Exai			poultry,	farm-raised fi	ish			
	_	No Yes							

Deb	Case 15-42802 DOC 1 FIIE0 12/21/15 otor 1 Chakita R Dolousasent First Name Middle Name Last Name	Page 14 oofa 49 u		Desc Main
48.	Cropseither growing or harvested			
	✓ No ☐ Yes. Give specific information			
49.	Farm and fishing equipment, implements, machinery, fixtures,	and tools of trade		
	✓ No ☐ Yes			
50.	Farm and fishing supplies, chemicals, and feed			
	✓ No ☐ Yes			
51.	Any farm- and commercial fishing-related property you did not	already list		
	✓ No Yes. Give specific information			
52.	Add the dollar value of all of your entries from Part 6, including attached for Part 6. Write that number here			\$0.00
Pa	art 7: Describe All Property You Own or Have an In	terest in That You [oid Not List Above	e
53.	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	?		
	✓ No Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
Pa	art 8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2		→	\$0.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$500.00		
58.	Part 4: Total financial assets, line 36	\$5,325.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	. \$0.00		
62.	Total personal property. Add lines 56 through 61	\$5,825.00	Copy personal property total	+\$5,825.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$5,825.00

Debtor 1 Chakita R Doloupasent Page 15 offast9number (if known)

First Name Middle Name Last N

Fill in this inf	ormation to i	identify your case	:
Debtor 1	Chakita	R	Lucas
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS
Case number			
(if known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

Part 1: Identify the Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1. Which set of exemptions are you claiming	? Check one only,	even if your spouse is filing	with you.	
You are claiming state and federal nonb You are claiming federal exemptions. 1		11 U.S.C. § 522(b)(3)		
2. For any property you list on Schedule A/B	that you claim as exer	npt, fill in the information	below.	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption		
Brief used furniture description: Line from Schedule A/B:6	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
Brief clothes description: Line from Schedule A/B: 11	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)	
3. Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every ✓ No ✓ Yes. Did you acquire the property cover	3 years after that for cas	ses filed on or after the date	,	

Debtor 1

Chakita

Document

Page 17 of 49 Case number (if known)

R First Name Middle Name

Last Name

Part 2: Additional Page

rtaantienai i age			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief cash description: Line from Schedule A/B:16	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief Chase description: Line from Schedule A/B:	\$75.00	\$75.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief 2015 tax refund, portion description: attributed to earned income Line from Schedule A/B:	\$4,000.00	\$4,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(g)(1), (2), (3)
Brief remaining portion of 2015 description: refund Line from Schedule A/B:28	\$1,200.00	\$1,200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

Fill in this info	Fill in this information to identify your case:							
Debtor 1	Chakita	R Middle Norse	Lucas					
	First Name	Middle Name	Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name					
· · · · · · · · · · · · · · · · · · ·		or that NODTHEDN D	ISTRICT OF ILLINOIS					
	ikrupicy Court to	or the: NORTHERN D	ISTRICT OF ILLINOIS					
Case number (if known)								

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1.	Do any	creditors	have	claims	secured	by	your	prope	rty?
• •	Doung	or cartor 5	iiu v c	oiuiiiio	occur cu	~,	y ou.	pi opci	чу.

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

 List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A

Amount of claim

Do not deduct the value of collateral

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
If any

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

Fill in this inf	ormation to i				
Debtor 1	Chakita First Name	R Middle Name	Lucas Last Name	_	
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name	-	
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS	_	
Case number					Check if this
(if known)					amended fili

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1:	I ist All of	Your PRIORITY	Unsecured C	laims

1.	Do any	creditors ha	ave priority	unsecured	claims	against y	ou?

No. Go to Part 2.

Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim Priority Nonpriority amount amount

Case 15-42802 Doc 1 Filed 12/21/15 Entered 12/21/15 10:32:03 Desc Main Page 20 of 49 Case number (if known) Document R Debtor 1 First Name Middle Name Last Name Part 2: **List All of Your NONPRIORITY Unsecured Claims** Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with you other schedules. $\overline{\mathbf{Q}}$ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2. Total claim 4.1 \$537.00 Capital One Bank USA NA Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 30281 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Salt Lake City UT 84130-0281 Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: П Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Card Is the claim subject to offset? **☑** No Yes 4.2 \$1,196.00 CB/Carson's Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O.Box 182789 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Columbus OH 43218 ☐ Disputed State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

Other. Specify Credit Card

Official Form 106E/F

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

✓ No ☐ Yes

At least one of the debtors and another

Check if this claim is for a community debt

Debtor 1

First Name

R

Middle Name

Document Last Name

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Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.3 \$405.00 Last 4 digits of account number Chase/Bank One Services Nonpriority Creditor's Name When was the debt incurred? 800 Brooksedge Blv As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Westerville OH 43081 Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Card Is the claim subject to offset? **☑** No ☐ Yes 4.4 \$285.00 Last 4 digits of account number Comcast Nonpriority Creditor's Name When was the debt incurred? PO Box 3002 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Southeastern 19398 □ Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify **Other** Is the claim subject to offset? **☑** No Yes \$244.00 Last 4 digits of account number Comenity Bank/Buckle Nonpriority Creditor's Name When was the debt incurred? P.O.Box 182789 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Columbus OH 43218-2789 Disputed City ZIP Code State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☐ Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Card Is the claim subject to offset?

√ No ☐ Yes

Document

Page 22 of 49
Case number (if known) R Chakita Debtor 1 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	n sequentially from the	Total claim
Comenity bank/express Nonpriority Creditor's Name P.O.Box 182789 Number Street Columbus OH 43218-2789	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$624.00
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
4.7 COMENITY BANK/NWYRK&CO Nonpriority Creditor's Name	_ Last 4 digits of account number When was the debt incurred?	\$994.00
P.O Box 182789 Number Street Columbus OH 43218-2789 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card	
A.8 Dept Of Ed/Navient Nonpriority Creditor's Name PO Box 9635 Number Street Wilkes Barre PA 18773 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Student loan	\$3,762.00
✓ No Yes		

Debtor 1

Chakita

R

Document

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$600.00
First Rate Financial	Last 4 digits of account number	Ψοσο.σο
Nonpriority Creditor's Name	When was the debt incurred?	
9500 S Halsted		
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
Chicago IL 60628	_ ☐ Disputed	
City State ZIP Code Who incurred the debt? Check one.		
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify Payday Ioan	
Is the claim subject to offset? No		
☑ No □ Yes		
4.10		\$300.00
Jackson Park Hospital	Last 4 digits of account number	Ψ000.00
Nonpriority Creditor's Name		
7531 S. Stony Island Ave	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
Chicago IL 60649	Unliquidated	
City State ZIP Code	— ☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify Medical	
Is the claim subject to offset?	_	
▼ No		
Yes		
4.11		
4.11		\$500.00
John H Stroger Cook County Hospital	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 70121	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
Chicago IL 60673	Unliquidated	
Chicago IL 60673 City State ZIP Code	_ Disputed	
Who incurred the debt? Check one.	Turns of MONDRIORITY unaccount of allating	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Other. Specify Medical	
✓ No		
Yes		

Document

Page 24 of 49 Case number (if known) R Chakita Debtor 1 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number ther previous page.	m sequentially from the	Total claim
Kay Jewelers Nonpriority Creditor's Name P.O.Box 740425 Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent	\$2,240.00
Cincinnati City State Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Other	
4.13 Midnight Velvet Nonpriority Creditor's Name 1112 7th Ave Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply.	\$250.00
Monroe City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	 Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Credit Card 	
North Shore Agency Nonpriority Creditor's Name 751 Summa Avenue Number Street Westbury NY 11590	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$0.00
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Collecting for -Verizon wireless	

Debtor 1

Chakita

R

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First Name Middle Name Last Name Page 25 of 49 Case number (if known)

Part 2: Your NONPRIORITY Unsecui	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.15		\$501.00
Penn Credit Corporation	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 988	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
Harrisburg PA 17108-0988	Unliquidated	
City State ZIP Code	_ ☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans	
Debtor 2 only Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims	
	Debts to pension or profit-sharing plans, and other similar debts	
-	Other. Specify Collecting for -Cook County Radiole	
Is the claim subject to offset? ✓ No		
Yes		
4.16		\$250.00
Stoneberry	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 2820	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
Monroe WI 53566-8020	Unliquidated	
City State ZIP Code	— ☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only At least one of the debtors and another	that you did not report as priority claims	
	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Other	
Is the claim subject to offset? No		
✓ No Yes		
4.17		\$123.54
T-Mobile	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 37380	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
Albuquerque NM 87176	Unliquidated	
City State ZIP Code	— ☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only At least one of the debtors and another	that you did not report as priority claims	
	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify cell phone	
Is the claim subject to offset?		
☑ No □ Yes		
□ 103		

Chakita

R

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Debtor 1

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number ther previous page.	n sequentially from the	Total claim
4.18		\$4,000.00
University of Illinois at Chicago	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
Physician Group Number Street	As of the date you file, the claim is: Check all that apply.	
135 S. LaSalle St., Box 3293	Contingent	
Chicago IL 60674	Unliquidated	
City State ZIP Code	_ ☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims	
Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical	
Is the claim subject to offset?	V Outer. Openiny Medical	
✓ No		
Yes		
4.19		\$1.171.96
US Cellular	Last 4 digits of account number	Ψ1,171.30
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 7835 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Succe	Contingent	
Madison WI 53707-7835	Unliquidated	
Madison WI 53707-7835 City State ZIP Code	- ☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	✓ Other. Specify Cellular Phone	
No No		
Yes		
4.20		4
		\$1,475.00
Verizon Wireless Nonpriority Creditor's Name	Last 4 digits of account number	
PO 25505	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
Lehigh Valley PA 18002	□ Disputed	
City State ZIP Code Who incurred the debt? Check one.	— (MANDRIADITY	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify Cell phone	
Is the claim subject to offset?		
✓ No ☐ Yes		

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Debtor 1

R First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.21 \$1,612.00 WebBank/Fingerhut Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 6250 Ridgeland Rd As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated **Saint Cloud** MN 56303 Disputed ZIP Code City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Card Is the claim subject to offset? ✓ No ☐ Yes

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Debtor 1

Part 3:

R Chakita

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First Name Middle Name Last Name

List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Convergent Outsourcing			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name PO Box 9004			Line of (Check one):				
Number Street			Collecting for -T-Mobile				
Renton City	WA State	98057 ZIP Code	Last 4 digits of account number				
City	State	ZIF Code					
IC System, Inc.			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name 444 Highway 96 East			Line of (Check one):				
Number Street			Collecting for - Verizon Part 2: Creditors with Nonpriority Unsecured Claims Wireless				
Saint Paul	MN	55164	Last 4 digits of account number				
City	State	ZIP Code	Last 4 digits of account number				
Joseph, Mann & Cree	d		On which entry in Part 1 or Part 2 did you list the original creditor?				
Name 23500 Mercantile Rd.			Line of (Check one):				
Number Street			Attorney for -Comcast Part 2: Creditors with Nonpriority Unsecured Claims				
Beachwood	ОН	44122-5927	Last 4 digits of account number				
City	State	ZIP Code					
Portfolio Recovery As	sociates	, LLC	On which entry in Part 1 or Part 2 did you list the original creditor?				
Name PO Box 12914			Line of (Check one):				
Number Street			Collecting for -US ✓ Part 2: Creditors with Nonpriority Unsecured Claims Cellular				
Norfolk	VA	23541	Last 4 digits of account number				
City	State	ZIP Code					
Stellar Recovery Inc			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name 1327 US Highway 2 W	ı		Line of (Check one):				
Number Street			Collecting for -Comcast Part 2: Creditors with Nonpriority Unsecured Claims				
Kalispell	МТ	59901	Last 4 digits of account number				
City	State	ZIP Code					

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Debtor 1

R

Document

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First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +	\$21,070.50
	6j.	Total. Add lines 6f through 6i.	6j.	\$21,070.50

Fill in this information to identify your case:								
Debtor 1	Chakita	R	Lucas					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing	g) First Name	Middle Name	Last Name					
United States E	Bankruptcy Court fo	or the: NORTHERN D	DISTRICT OF ILLINOIS					
Case number								
(if known)								

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1.	Do you have any executory contracts or unexpired leases?
	No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
	Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B)

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill in this inf	ormation to i				
Debtor 1	Chakita First Name	R Middle Name	Lucas Last Name	_	
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS		
Case number (if known)				_	eck if t ended

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	 Do you have any codebtors? (If you are filing a joint case ✓ No ✓ Yes 	e, do not list either spouse as a codebtor.)
2.	 Within the last 8 years, have you lived in a community pro include Arizona, California, Idaho, Louisiana, Nevada, New N 	operty state or territory? (Community property states and territories Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
	No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivaled No Yes Yes	nt live with you at the time?
3.	person shown in line 2 again as a codebtor only if that pe	ur spouse as a codebtor if your spouse is filing with you. List the erson is a guarantor or cosigner. Make sure you have listed the //F (Official Form 106E/F), or <i>Schedule G</i> (Official Form 106G). Use nn 2.
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the del

Check all schedules that apply:

Page 32 of 49 Document Fill in this information to identify your case: Chakita Lucas Debtor 1 First Name Middle Name Last Name Check if this is: Debtor 2 An amended filing Middle Name (Spouse, if filing) First Name Last Name A supplement showing postpetition NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: chapter 13 income as of the following date: Case number (if known) MM / DD / YYYY Official Form 106I Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Employment** Fill in your employment information. Debtor 1 Debtor 2 or non-filing spouse If you have more than one **Employment status** Employed Employed job, attach a separate page with information about ■ Not employed Not employed additional employers. Occupation Housekeeper Include part-time, seasonal, Crestline Hotels & Resorts, LLC or self-employed work. **Employer's name** Occupation may include **Employer's address** 10 East Grand Ave student or homemaker, if it Number Street Number Street applies. Chicago 60611 State Zip Code City State Zip Code How long employed there? 8 years Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse \$2,041.00 List monthly gross wages, salary, and commissions (before all 2. payroll deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. \$0.00

Calculate gross income. Add line 2 + line 3.

\$2,041.00

Page 33 of 49 Case number (if known) Document R Debtor 1 Chakita First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$2,041.00 List all payroll deductions: \$309.83 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. 5g. \$0.00 5g. Union dues 5h. Other deductions. \$0.00 5h. + Specify: Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + \$309.83 5g + 5h. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$1,731.17 List all other income regularly received: 8a. Net income from rental property and from operating a \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends \$0.00 8c. Family support payments that you, a non-filing spouse, or a 8c. \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation b8 \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: \$0.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. 8h. 🛓 Specify: \$0.00 **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. \$0.00 Calculate monthly income. Add line 7 + line 9. \$1,731.17 \$1,731.17 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 Specify: 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12 \$1,731.17 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? None.

Yes. Explain:

Case 15-42802 Doc 1 Filed 12/21/15 Entered 12/21/15 10:32:03 Desc Main Page 34 of 49 Document Fill in this information to identify your case: Check if this is: An amended filing Debtor 1 Chakita R Lucas Middle Name First Name Last Name A supplement showing postpetition chapter 13 expenses as of the Debtor 2 following date: (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS MM / DD / YYYY Case number (if known) Official Form 106J **Schedule J: Your Expenses** 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Your Household** Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No Dependent's relationship to Dependent's Does dependent Yes. Fill out this information \square Do not list Debtor 1 and Debtor 1 or Debtor 2 age live with you? for each dependent..... Debtor 2. No 11 $\overline{\mathbf{Q}}$ Yes Do not state the dependents' No names. <u>10</u> $\sqrt{}$ Yes No Yes Nο Yes No Do your expenses include No expenses of people other than Yes yourself and your dependents? Part 2: **Estimate Your Ongoing Monthly Expenses** Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) Your expenses \$750.00 The rental or home ownership expenses for your residence. 4. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a.

4b. Property, homeowner's, or renter's insurance4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

4b.

4c.

4d.

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Debtor 1 Chakita

First Name

Middle Name

Document

Last Name

Your expenses Additional mortgage payments for your residence, such as home equity loans 5. 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$200.00 6b. Water, sewer, garbage collection 6b 6c. Telephone, cell phone, Internet, satellite, and 6c. \$100.00 cable services 6d. 6d. Other. Specify: Food and housekeeping supplies 7. \$350.00 Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. 11. Medical and dental expenses 11. 12. Transportation. Include gas, maintenance, bus or train 12. \$116.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. magazines, and books 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. Vehicle insurance 15c. 15d. Other insurance. Specify: 15d. **16. Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. 17c. Other. Specify: after school care and bus 17c. \$140.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. 19. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. 20b. Real estate taxes 20h. 20c. Property, homeowner's, or renter's insurance 20c. 20d. Maintenance, repair, and upkeep expenses 20d. 20e. Homeowner's association or condominium dues 20e

		Case 15-428		Document	Entere Page 36	a 12/21/15 10: S of 49		Desc Main
Deb	tor 1	Chakita First Name	R Middle Name	Lucas Last Name	- ago oc	Case numbe	r (if known	n)
21.	Oth	er. Specify:					_ ^{21.} •	-
22.	Calc	culate your monthly	/ expenses.				_	
	22a.	. Add lines 4 throug	gh 21.				22a.	\$1,731.00
	22b.	. Copy line 22 (mor	nthly expenses for D	ebtor 2), if any, from Of	ficial Form 10	6J-2.	22b.	
	22c.	. Add line 22a and	22b. The result is yo	our monthly expenses.			22c.	\$1,731.00
23.	Calc	culate your monthly	/ net income.				_	
	23a.	. Copy line 12 (you	r combined monthly	income) from Schedule	e I.		23a.	\$1,731.17
	23b.	. Copy your monthl	y expenses from line	e 22c above.			23b. _	\$1,731.00
	23c.		nthly expenses from monthly net income	your monthly income.			23c.	\$0.17
24.	Doy	you expect an incre	ase or decrease in	your expenses within	the year afte	er you file this form?		
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?							
	$\overline{\mathbf{V}}$	No						
		Yes. Explain here: None.						

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Fill in this inf	ormation to i	dentify your case	:						
Debtor 1	Chakita First Name	R Middle Name	Lucas Last Name						
Debtor 2	i iist ivairie	Middle Name	Lastivame						
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS									
Case number (if known)					Check if this is an amended filing				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	Part 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	* 0.00
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$5,825.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$5,825.00
	Cop, co, c. a p. op. y c co c	
P	Part 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	* 0.00
	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$21,070.50
	Your total liabilities	\$21,070.50
P	Part 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,731.17
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,731.00

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First Name Middle Name

Part 4: Answer These Questions for Administrative and Statistical Records

6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?					
	 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ✓ Yes 					
7. What kind of debt do you have?						
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.					
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.					
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.					
9	Copy the following special categories of claims from Part 4. line 6 of Schedule F/F					

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. Total. Add lines 9a through 9f.	\$0.00

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Fill in this inf	. •				
Debtor 1	Chakita First Name	R Middle Name	Lucas Last Name	_	
Debtor 2	i iistivaille	Middle Name	Lastivanio		
(Spouse, if filing)	First Name	Middle Name	Last Name	-	
United States Ba	nkruptcy Court fo	r the: NORTHERN D	ISTRICT OF ILLINOIS	_	
Case number (if known)					

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below								
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
☑ No								
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.								
X /s/ Chakita R Lucas Signature of Debtor 1	XSignature of Debtor 2							
Date 12/21/2015 MM / DD / YYYY	Date MM / DD / YYYY							

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Page 40 of 49 Document Fill in this information to identify your case: Chakita Debtor 1 R Lucas Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS** Case number ☐ Check if this is an (if known) amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? ☐ Married ✓ Not married During the last 3 years, have you lived anywhere other than where you live now? Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: **Dates Debtor 1** Debtor 2: **Dates Debtor 2** lived there lived there Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Debtor 1

Chakita

R

Doloucasent

First Name Middle Name

Last Name

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Part 2:	Explain the Sources of Your Incom-

4. Did you have any income from em Fill in the total amount of income you If you are filing a joint case and you	u received from all jobs and all busi	inesses, including par	t-time activities.	endar years?
No✓ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
From January 1 of the current year unt the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$22,000.00	Wages, commissions, bonuses, tips	
	Operating a business		Operating a business	
For the last calendar year:	✓ Wages, commissions, bonuses, tips	\$25,000.00	Wages, commissions, bonuses, tips	
(January 1 to December 31, 2014)	Operating a business		Operating a business	
For the calendar year before that:	✓ Wages, commissions, bonuses, tips	\$23,000.00	Wages, commissions, bonuses, tips	
(January 1 to December 31, 2013)	Operating a business		Operating a business	
 Did you receive any other income Include income regardless of whether unemployment; and other public ber and gambling and lottery winnings. Debtor 1. List each source and the gross incom No Yes. Fill in the details. 	er that income is taxable. Example nefit payments; pensions; rental income in a joint case and you have	s of other income are ome; interest; dividen- ave income that you re	ds; money collected from law eceived together, list it only c	vsuits; royalties;

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Debtor 1

Yes. List all payments that benefited an insider.

R

Doloucasent Page 42 ofase9number (if known)

	F	ırst Name	Middle	Name	Last Name			
Р	art 3:	List Ce	ertain Paymei	nts You Ma	de Before Y	ou Filed for Ba	nkruptcy	
6.	Are eithe	r Debtor	1's or Debtor 2's	s debts prima	rily consumer	debts?		
	□ No.			-	-	ner debts. Consur ily, or household pu		ed in 11 U.S.C. § 101(8) as
		During t	the 90 days befor	e you filed for	bankruptcy, did	l you pay any credit	or a total of \$6,225	* or more?
		☐ No.	Go to line 7.					
		Yes.	total amount yo	u paid that cre	ditor. Do not ir	total of \$6,225* or m nclude payments for ide payments to an	domestic support	obligations, such as
		* Subjec	ct to adjustment of	on 4/01/16 and	every 3 years	after that for cases	filed on or after the	date of adjustment.
	✓ Yes.	Debtor	1 or Debtor 2 or	both have pri	marily consur	ner debts.		
		During t	the 90 days befor	e you filed for	bankruptcy, did	l you pay any credit	or a total of \$600 o	r more?
		✓ No.	Go to line 7.					
		☐ Yes.	creditor. Do no	t include paym	ents for domes	total of \$600 or mor stic support obligation for this bankruptcy	ns, such as child s	unt you paid that upport and alimony.
					Dates of payment	Total amount paid	Amount you stil owe	Was this payment for
7.	Insiders in corporation agent, income	nclude yo ons of whi cluding on	our relatives; any ich you are an of	general partne icer, director, p	ers; relatives of person in contr	any general partner ol, or owner of 20%	rs; partnerships of vormore of their vor	ne who was an insider? which you are a general partner; ing securities; and any managing ts for domestic support obligations
	✓ No ☐ Yes.	List all pa	ayments to an ins	sider.				
					Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.		year befo	-	bankruptcy, d	lid you make a	ny payments or tra	ansfer any proper	ry on account of a debt that
	Include p	ayments o	on debts guarant	eed or cosigne	ed by an insider	:		
	☑ No							

Total amount

paid

Amount you

still owe

Reason for this payment

Include creditor's name

Dates of

payment

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Debtor 1

Chakita

R

Doloucasent

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First Name Middle Name

Last Name

Part 4:	Identify Le	egal Actions,	Repossessions,	and Foreclosures
---------	-------------	---------------	----------------	------------------

).	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.							
	✓ No ☐ Yes. Fill in the details.							
	Nature of the case Court or agency Status of the case							
0.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.							
	✓ No. Go to line 11.✓ Yes. Fill in the information below.							
1.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?							
	✓ No ☐ Yes. Fill in the details.							
2.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?							
	☑ No ☐ Yes							
Pa	art 5: List Certain Gifts and Contributions							
3.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?							
	✓ No✓ Yes. Fill in the details for each gift.							
4.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?							
	✓ No✓ Yes. Fill in the details for each gift or contribution.							
Pá	art 6: List Certain Losses							
5.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?							
	✓ No ☐ Yes. Fill in the details.							

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First Name

Downsent

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Debtor 1

Middle Name

Pa	art 7:	List Cert	ain Pa	yments or	Transfers		
6.	anyone	you consulte	ed abou	t seeking bar	ptcy, did you or anyone else acting on your behal nkruptcy or preparing a bankruptcy petition? oreparers, or credit counseling agencies for services		
	□ No ☑ Yes	. Fill in the de	etails.				
		dams & Ass	sociate	s	Description and value of any property transferre 399 received, applied to filing fee	ed Date payment or transfer was made	Amount of payment
Person Who Was Paid 1001 W. Jackson, Suite 202 Jumber Street			202		-	12/19/2015	_
`hi	cago		IL.	60607	-		_
City	cago		State	ZIP Code	-		
ma	il or website	e address			-		
ers	on Who Ma	ade the Paymen	nt, if Not Y	ou	-		
7.					ptcy, did you or anyone else acting on your behal vith your creditors or to make payments to your c		perty to
	Do not in	nclude any pa	yment o	r transfer that	you listed on line 16.		
	✓ No ☐ Yes	. Fill in the de	etails.				
8.	property	y transferred	in the o	ordinary cour	uptcy, did you sell, trade, or otherwise transfer ar se of your business or financial affairs?		
		•			s made as security (such as granting of a security int nave already listed on this statement.	erest or mortgage on your	property).
	✓ No ☐ Yes	. Fill in the de	etails.				
9.		•	•		ruptcy, did you transfer any property to a self-set called asset-protection devices.)	tled trust or similar devi	ce of which

 $\stackrel{-}{\square}$ Yes. Fill in the details.

Case 15-42802 Filed 12/21/15 Entered 12/21/15 10:32:03 Desc Main Doc 1 Chakita **Dolouciasent** Page 45 of 49 number (if known) Debtor 1 Middle Name Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. **☑** No Yes. Fill in the details. 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? **☑** No ☐ Yes. Fill in the details. 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Part 9: **Identify Property You Hold or Control for Someone Else** 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **☑** No ☐ Yes. Fill in the details. Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **☑** No ☐ Yes. Fill in the details. 25. Have you notified any governmental unit of any release of hazardous material?

☐ Yes. Fill in the details.

Б.		Case 15	-42802			L2/21/15			21/15 10:		Desc Main
Der	otor 1	Chakita First Name		R Middle Name		casent t Name	Paye	40 Wases	number (if kno	own)	
26.		Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.									
	☑ N	lo ′es. Fill in the	e details.								
P	art 11	Give D	etails A	bout Your E	Business	or Connec	ctions to	Any Bus	siness		
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?										
		A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation									
	✓ No. None of the above applies. Go to Part 12.✓ Yes. Check all that apply above and fill in the details below for each business.										
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						iness? Include				
		lo ′es. Fill in the	e details b	elow.							
Р	art 12	Sign E	selow								
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.											
X	s/ Cha	akita R Luc	as		х						
-		ure of Debtor				Signature of	Debtor 2		_		
ı	Date _	12/21/20	15			Date					
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?											
	No Yes										
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?											
_	No Yes. I	Name of pers	son								Petition Preparer's Notice,
Declaration, and Signature (Official Form 119).											

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Fill in this information to identify your case:						
Debtor 1	Chakita First Name	R Middle Name	Lucas Last Name			
Debtor 2	i iist Name	Wildule Ivaille	Lastivanie			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court f	or the: NORTHERN D	ISTRICT OF ILLING	IS		
Case number (if known)						

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

 For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

None.

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X /s/ Chakita R Lucas	X
Signature of Debtor 1	Signature of Debtor 2
Date 12/21/2015	Date
MM / DD / YYYY	MM / DD / YYYY

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

In	n re Chakita R Lucas	Case No.				
		Chapter <u>7</u>				
	DISCLOSURE OF COMPENSATION OF AT	TTORNEY FOR DEBTOR				
1.	. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I a that compensation paid to me within one year before the filing of the petitic services rendered or to be rendered on behalf of the debtor(s) in contempt is as follows:	on in bankruptcy, or agreed to be paid to me, for				
	For legal services, I have agreed to accept					
	Prior to the filing of this statement I have received	\$40.00				
	Balance Due	\$1,160.00				
2.	2. The source of the compensation paid to me was:☑ Debtor ☐ Other (specify)					
3.	The source of compensation to be paid to me is:					
	✓ Debtor ☐ Other (specify)					
4.	 I have not agreed to share the above-disclosed compensation with an associates of my law firm. 	ny other person unless they are members and				
	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.					
5.	5. In return for the above-disclosed fee, I have agreed to render legal service	e for all aspects of the bankruptcy case, including:				
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition bankruptcy;					
	b. Preparation and filing of any petition, schedules, statements of affairs a	and plan which may be required;				
	c. Representation of the debtor at the meeting of creditors and confirmation	on hearing, and any adjourned hearings thereof;				

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

> 12/21/2015 /s/ Robert J. Adams & Associates

Robert J. Adams & Associates Date Robert J. Adams & Associates 901 W. Jackson St., Suite 1810

Chicago, IL 60607 Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056